## Notification of Hazardous Waste Lite

**United States** Environmental Pro Agency Washington DC 2C

This initial notification information is

Please type or print in ink. If you need

	hensive Environmental Respons sation, and Liability Act of 1980 be mailed by June 9, 1981.	e, Compen- and must	paper. Indicate the which applies.	e separate she letter of the iter	ets of n		
		14#4	31	,	1LS-000-C	101-387	
A	Person Required to Notify:  Enter the name and address of the person		Name Browning	-Ferris I	Ndustries of Illino		
	or organization required to notify	1.			Square, Suite 10		
					State ILL.		
	The state of the s		CHY SE-1 AUM SU	·)	State ILL.	Zip Code 6 C// 3	
В	Site Location:						
	Enter the common name (if know actual location of the site.	vn) and	Street People A	ue. And	MAGNOLIA		
I	LD980606651	/	City Rockford	County	Winnebago State ILL.	Zip Code 6// 87	
C	Person to Contact:	TOTAL THE PERSON NAMED AND THE PERSON NAMED IN		THE THE PARTY OF T			
	Enter the name, title (if applicable), and		Name (Last, First and Title) Edema, George - Dir. of Marketing Dir.				
	business telephone number of the person to contact regarding information submitted on this form.		Phone (3/2) 39	-			
D	Dates of Waste Handling:		1 -				
	Enter the years that you estimate treatment, storage, or disposal be ended at the site.		From (Year) 196	\$ (Est)To (Year)	1972		
E	Waste Type: Choose the option	on you pre	fer to complete				
Option I: Select general waste types and sour you do not know the general waste types or sencouraged to describe the site in Item I—Des		sources, you are	Resource (	This option is available to po Conservation and Recovery A s (40 CFR Part 261).	ersons familiar with Act (RCRA) Section		
	General Type of Waste: Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.  Source of Place and boxes.		Waste: K in the appropriate	EPA has as listed in th appropriate the list of the contacting	ype of Waste: ssigned a four-digit number e regulations under Section e four-digit number in the be nazardous wastes and codes the EPA Region serving the	3001 of RCRA. Ent exes provided. A col s can be obtained by	
	1. ☐ Organics	1. 🗆 Mir	ing	located.			
	2. Inorganics	2. Cor					
	3. ☐ Solvents	3. ☐ Tex					
	4. ☐ Pesticides	4. 🗆 Fert	The state of the s				
	5. ☐ Heavy metals		er/Printing				
	6. □ Acids		ther Tanning				
	7. ☐ Bases 8. ☐ PCBs		/Steel Foundry				
,	9.  Mixed Municipal Waste		mical, General				
* *	10. 🛭 Unicommunicipal Waste		ing/Polishing				
	11. Other (Specify)		tary/Ammunition				
Sa			ctrical Conductors				
	th small quantities	12. 🗆 Trai		1	The second second		
	unknown hazardous		ity Companies				
	ste.		itary/Refuse	000	282 JUN -981		
wa	ste.	15. □ Pho		000	2 0 2 JUN -9 81		
c.	mall quantities of	16. □ Lab					
21	"arr daguereres or	17. 🗆 Unk	IIOWI				

US EPA RECORDS CENTER REGION 5

JUN 15 1981

18. ☐ Other (Specify)

wastes mixed with industrial/commercial/

Form Approved OMB No. 2000-0138

unknown hazardous

municipal/household wastes.

EPA Form 8900-1

1	Notification of Hazardous Waste Site	Side Two		A.			
F	Waste Quantity:	Facility Type	Total Facility Waste Amou	nt .			
	Place an X in the appropriate boxes to indicate the facility types found at the site.	1. □ Piles	cubic feet can Kno un				
	In the "total facility waste amount" space	2.   Land Treatment	1)				
	give the estimated combined quantity	3. ⊠ Landfill 4. □ Tanks	gallons				
	(volume) of hazardous wastes at the site using cubic feet or gallons.	5. Impoundment	Total Facility Area				
	In the "total facility area" space, give the	6.  Underground Injection	square feet	17			
	estimated area size which the facilities occupy using square feet or acres.	7.   Drums, Above Ground	acres 36 ALVES	*			
	occupy using square reet of acres.	8. Drums, Below Ground					
_	И	9. Other (Specify)					
G	Known, Suspected or Likely Releases to the Environment:  Place an X in the appropriate boxes to indicate any known, suspected,  Unknown Suspected   Likely						
	or likely releases of wastes to the environmen	☐ Known ☒ <del>Suspected</del> ☐ Li	kely 🗆 No				
	Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assess hazardous waste sites. Although completing the items is not required, you are encouraged to do so.						
H	Sketch Map of Site Location: (Optiona	1)					
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.						
				1000			
		-					
<u> </u>	Description of Site: (Optional)						
	Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.						
J	"The information contained herein is based upon the personal knowledge or						
	recollection of the individual compiling the information or upon records or						
	other informational sources reasonably available to him (see item C). The						
	information herein is accurate and complete to the best of the knowledge and belief of the submittor. The indication in Item E, numbers 9 and 10 does not						
	constitute an admission that such wastes, if they exist, are in fact hazardous						
	The indication in Item G that a release is "known" or "likely" does not con-						
	stitute an admission that such release is either continuing or, if it is,						
	that it poses a threat to hi	uman health or the en	vironment."	.5,			
=	0'			.5,			
 J	Signature and Title:	C		.5 /			
J	The person or authorized representative (such as plant managers, superintendents,	dame Stephen L. Thomas,	U Owne	er, Present			
, <u> </u>	The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required	Name Stephen L. Thomas,	□ Owne	er, Present er, Past			
 'J	The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address	Tropia L. Jionas	□ Owne □ Trans	er, Present er, Past porter			
*J	The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing	Tropia L. Jionas	Owne	er, Present er, Past			

SEPA POTENTIAL HAZARDOUS WASTE SITE	IDENTIFICATION REGION	ON SITE NUMBER
NOTE: The initial identification of a potential site or incident activity or confirmation that an actual health or environce be assessed under the EPA's Hazardous Waste Site E a hazardous waste problem actually exists.	nmental threat exists. All ide	a finding of illegal entified sites will
Growning terres Industries - Koc 1	TREET (or other identifier)	
C. CITY Rockford	TATE E. ZIP CODE F. C	OUNTY NAME
G. OWNER/OPERA FOR (if known)  NAME	2. T	ELEPHONE NUMBER
1. TYPE OF OWNERSHIP (II known)  1. FEDERAL 2. STATE 3. COUNTY 4. MUNICIPAL	L S. PRIVATE 6. UN	киоми
1. SITE DESCRIPTION		
J. HOW IDENTIFIED (i.e., citizen's complaints, OSHA citations, etc.)		K. DATE IDENTIFIED (mo., day, & yr.)
L. SUMMARY OF POTENTIAL OR KNOWN PROBLEM		(200, 20), 20
and of the control of		
	•	
t .		
•		
M. PREPARER INFORMATION 1. NAME	2. TELEPHONE NUMBER	3. DATE (mo., day, & yr.)

SEPA
File this form in the region Syste .; Hazardous Waste
Browning
ROCK for
Indicate the recommended

## POTEN L HAZARDOUS WASTE SITE

## FINAL STRATEGY DETERMINATION

REGION	SITE NUMBER
V	12080010071

File this form in the regional Hazardous Waste Log File and submit a copy to: U.S. Environmental Protection Agency; Site Tracking Syste .; Hazardous Waste Enforcement Task Force (EN-335); 401 M St., SW; Washington, DC 20460.								
	I. SITE IDENT	IFICATION					24	
Browning Ferris I		B. STREET						
C. CITY	7	D. STATE	1		E. ZII	PCODE	TOU IN	
Rocktord	T Chill DETE	1/						
Indicate the recommended action(s) and agency(ie	II. FINAL DETE			n the appr	opriate box	es.		
RECOMMENDATION			ACTION AGENCY					
			MARK'X'	EPA	STATE	LOCAL	PRIVATE	
A. NO ACTION NEEDED				X				
B. RE IEDIAL ACTION NEEDED, BUT NO RESOURC	ES AVAILABLE							
C. REMEDIAL ACTION (II yes, complete Section IV.)								
D. ENFORCEMENT ACTION (If yes, specify in Pert E managed by the EPA or the State and what type of e	whether the case winforcement action is	ill be primarily anticipated.)	,				Maria	
This site is t	he off			22 0	4			
Browning Ferris	Indus	tries	r					
F. IF A CASE DEVELOPMENT PLAN HAS BEEN PREPARED, SPECIFY G. IF AN ENFORCEMENT CASE HAS BEEN FILED, SPECIFY THE THE DATE PREPARED (mo., day, & yt.)					FY THE			
1. NAME  1. NAME  2. TELEPHO				10NE NUMBER . 3. DATE (mo., day, & yr.).				
IN REMEDIAL ACTIONS	and the same and t	HEN RESOUR	RCES BECOM	AE AVAIL	ABLE			
List all remedial actions, such as excavation, refor a list of Key Words for each of the actions to remedy.	moval, etc. to be to	aken as soon	as resource	s become	available.			
A. REMEDIAL ACTION	B. ESTIMAT	ED COST		c.	REMARKS			
	s							
	s			1.2	And the second	•		
	s		1					
	s							
	s		•					
	s							
	s				HIA			
	s		_					
D. TOTAL ESTIMATED COST \$					***		400	